

# HEPATITIS C & PRISONER RE-ENTRY INITIATIVE

(FY2007 Appropriation Bill - Public Act 330 of 2006)

**April 1, 2007**

**Section 804:** The department, in conjunction with efforts to implement the Michigan prisoner reentry initiative, shall cooperate with the department of corrections to share data and information as it relates to prisoners being released and hepatitis C. By April 1, 2007, the department shall report to the senate and house appropriations subcommittees on community health, the senate and house fiscal agencies, and the state budget director on the progress and results of its work and the potential outcomes from its work with the department of corrections under this section.

*Michigan Department  
of Community Health*



**Jennifer M. Granholm, Governor**  
**Janet Olszewski, Director**

**Michigan Department of Community Health  
Progress Report on Hepatitis C  
And Corrections/Prisoner Re-Entry Initiatives**

Studies of hepatitis C in prison populations have estimated that 23 to 43 percent of prisoners have ever been infected with the hepatitis C virus. These prevalence rates are 14 to 17 times greater than the estimated prevalence rate for the general population and prisoners are at high-risk for infection with the virus that causes hepatitis C.

The following provides a brief overview of efforts made by the Michigan Department of Community Health to increase knowledge about hepatitis C in correctional populations and to facilitate the delivery of hepatitis-related services to this group.

- Michigan Prisoner Re-entry Initiative: Hepatitis C Guidance Document: The Michigan Department of Community Health, with input from the Michigan Department of Corrections, developed a Hepatitis C Guidance Document that was disseminated to all Michigan Prisoner Re-entry Initiatives in September of 2005. This document: 1) included background information on hepatitis C, 2) provided rationale for providing hepatitis C-related services to individuals released from correctional facilities in Michigan, 3) identified existing agencies/programs that could be assets in developing hepatitis C-related services for re-entry populations, 4) delineated challenges to implementing such services, and 5) suggested several steps Michigan Prisoner Re-Entry Initiatives could take to address hepatitis C
- Hepatitis C: Collaboratively Confronting the Challenge Conference: In October 2005, the Michigan Department of Community Health, in conjunction with the American Liver Foundation – Michigan Chapter, held a statewide conference on hepatitis C entitled, *Hepatitis C: Collaboratively Confronting the Challenge*. A statewide planning committee was convened that included representatives from the multiple constituencies that need to be involved in addressing hepatitis C. The Medical Director from the Michigan Department of Corrections was a member of that committee and was integrally involved in the planning process. The conference agenda provided a wide range of hepatitis C information that would have applicability to those working with correctional populations. One of the workshops focused specifically on hepatitis C in correctional populations, showcasing a model hepatitis C program that involved a partnership between corrections, public health, and academia. The conference was marketed to and attended by correctional personnel.
- Michigan Department of Community Health Internal Hepatitis Work Group: In 2004, the Michigan Department of Community Health established an Internal Hepatitis Work Group. Membership included representatives from the various sections, departments, and bureaus with hepatitis-related responsibilities. The purpose of the Work Group included: 1) providing an opportunity to increase knowledge and skills related to hepatitis prevention, diagnosis, management, and treatment, 2) facilitating communication and collaboration between the different sections, departments and bureaus providing hepatitis-related services, and 3) assessing the need for and planning for new and expanded services.

In late 2005, the Work Group discussed expanding the group to include key persons outside of the Michigan Department of Community Health that needed to be involved in addressing hepatitis issues. An invitation was extended to and accepted by the Medical

Director of the Michigan Department of Corrections and in February 2006, he was added to the Work Group. In September 2006, a decision was made that the needed collaboration and coordination of hepatitis activities was happening at a programmatic level, and the Work Group was disbanded.

- Hepatitis C: From Silence to Solutions Conference: In December 2007, the Michigan Department of Community Health and the American Liver Foundation – Michigan Chapter will hold a second statewide conference on hepatitis C, entitled *Hepatitis C: From Silence to Solutions*. As with the 2005 conference, a diverse planning committee was convened. The Medical Director for the Michigan Department of Corrections was invited and agreed to be a member of this committee and was involved in determining the overall conference vision, drafting conference goals and objectives, and identifying some of the session topics. The conference agenda will address a diverse array of topics. Marketing for the conference includes sharing information about the conference with correctional personnel including Michigan Department of Corrections, Correctional Medical Services, the Michigan Sheriff's Association, Michigan Prisoner Re-entry Initiatives, and city/county correctional facilities.
- Statewide Hepatitis C Task Force: Public Act 238, which was passed on June 26, 2006, calls for the development of a Hepatitis C Advisory Task Force. The Task Force will consist of 11 members to be appointed by the Governor. In addition to the director of the Michigan Department of Community Health and her designee, the membership will be comprised of a member from an association representing local public health and nine members appointed from the following categories: 1) business and industry, 2) labor, 3) health care providers, 4) the legal community, 5) religious organizations, 6) state and local government, and 7) the education community. The Michigan Department of Community Health prepared a list of individuals for consideration/possible appointment to the Task Force and forwarded to the Governor's office. In recognition of the high prevalence of hepatitis C in correctional populations, included on this list were the Director of the Michigan Department of Corrections, or her designee, and a representative of the Michigan Corrections Organization.

The Michigan Department of Community Health will continue to develop relationships and to pursue ways to build collaborations that will result in hepatitis C being effectively addressed in correctional populations.